

Work Order ID 89774

89774

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Thursday, September 06, 2012 11:48:04 AM

Item ID: D120-639-011 Accept ***N900040100*** Setup Start ***NS1***
 Revision ID: Stop ***NS2***
 Item Name: Tungsten Carbide Wearplate
 Start Date: 9/5/2012 Start Qty: 2.00 ***2*** Cust Item ID:
 Required Date: 9/6/2012 Req'd Qty: 2.00 ***2*** Customer: CU-DAR001
 Reference: RMA RA111395 - *RETURN*

Approvals: Process Plan: *mf* Date: *12-09-06* Tooling: Date: Run Start ***NR1***
 QC: Date: SPC (Y/N): Date: Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
Draw Nbr	Revision Nbr								
DSI 9223	Rev A								
IIN-D120-639	Rev A								

100

0.00

100

QC

Quality Control

Memo

INSPECT RA 111395 D120-639-011 X 2 B#78384

KIT IS COMPLETE
 NEEDS TO BE REPACKAGED IN NEW BAGS
 NEW PAPERWORK AND LABELS

0.00

DAS 16 17/08/07
CH6002

ID + STOCK - 10/12/07

110

0.00

110

Packaging

Packaging

Memo

0.00

mf 12-09-07

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Thursday, September 06, 2012 11:48:04 AM

Item ID: D120-639-011

Accept

N900040100Setup Start ***NS1***

Revision ID:

Item Name: Tungsten Carbide Wearplate

Stop ***NS2***Start Date: 9/5/2012 Start Qty: 2.00 ***2***

Cust Item ID:

Required Date: 9/6/2012 Req'd Qty: 2.00 ***2***

Customer: CU-DAR001

Reference: RMA RA111395

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

Run Start ***NR1***

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop ***NR2***Sequence ID/
Work Center IDOperation
DescriptionSet Up/
Run HoursTool ID Tool # Plan
CodeAccept
QtyReject
QtyReject
NumberInsp.
Stamp

120

QC21- Final Inspection - Work Order Release

0.00

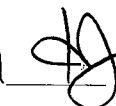
120

QC

Memo

0.00

Quality Control

CH6002 12/9/11 

Picklist Print

Thursday, September 06, 2012 11:48:12 A

Page 1

Work Order ID: 89774

Parent Item: D120-639-011

Start Date: 9/5/2012

Required Date: 9/6/2012

Parent Item Name: Tungsten Carbide Wearplate

Start Qty: 2.00

Required Qty: 2.00

Comments: IPP D 02.09.13 Re-format, Added MS27130-S30 KJ

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
D120-639-011 Tungsten Carbide Wearplate		Manufactured	No				Each	1.0000		2			

Location

Loc Qty

Loc Code

FG033

1

84620

1

B78384 (2)

RA 111395 D120-639-011

B78384

Received @ Dart august 8th, 2012
Inspected @ Dart August 27th, 2012

Customer: EUROCOPTER MALAYSIA
Customer Contact: NOR AZMAN HUIR
Shipped from: SUBANG SELANGOR MY

Instructions for RA 111395 D120-639-011 B78284 CHG002

- Kit is complete
- Needs to be repackaged in new plastic bags. (please attach the original part & batch #'s)
- Needs new paper work and labels
- Needs new BATCH # to go back into stock

Time Estimate = 1 HOUR ONLY (stores)

Departments Required: Stores (restocking)

Pictures Attached = NO

**THIS INSTRUCTION SHEET MUST
BE ATTACHED TO THE
RESTOCKING WORK ORDER AT
ALL TIMES!!!!**

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											

FAULT CATEGORY				
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other	